

POSITION

INITIALS

ID NO.

DATE

## FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

AK

931

04/17/01

K2

2.2

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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Original	
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52	2/24/03
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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505  
 4/16/02